PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number 10604026

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN											10.00	
TOTAL OLAIMO			(Column 1)		(Column 2)		T	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			24					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBI	ER EXTRA	E	BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			2 / minus 20=		* 4			X\$ 9=		OR	X\$18=	212.
INDEPENDENT CLAIMS			6 mi	nus 3 =	* 3		ı	X42=		OR	X84=	212-
MULTIPLE DEPENDENT CLAIM PRESENT							İ	+140=		OR	+280=	<i>A</i> J ·
* If the difference in column 1 is less than zero, ent					"0" in c	olumn 2	L	TOTAL			TOTAL	1254
	C	LAIMS AS A	MENDED - PART II					ı		1.7	OTHER	THAN
		(Column 1)		(Colur	nn 2)	(Column 3)		SMALL ENTITY			SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	·
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM			+140=		OR	+280=	
							L	TOTAL			TOTAL	
							Α	DDIT. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS		(Colui		(Column 3)	1 -			1 9		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						!			OIT		
	* 5						L	+140=		OR	+280=	
							A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	ن ن ن ن
		(Column 1)		(Colu	mn 2)	(Column 3)					1 (1) (1) (1)	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGF NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18≠	26 + 30 + 10 + 10 + 10 + 10 + 10 + 10 + 10
	Independent	*	Minus	***		=		X42=		OR	X84=	
Ĺ	FIRST PRESE	ILTIPLE DEPENDEN		T CLAIM] -			UH			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
		nber Previously Pa					er four	nd in the app	propriate box	x in co	lumn 1.	